



9% complete

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The following items are about activities you might do during a typical day.

Does **your health now limit you** in these activities? If so, how much?

Vigorous activities, such as running, lifting heavy objects, participating in strenuous sports



Yes, limited a lot



Yes, limited a little

No, not limited at
all

Moderate activities, such as moving a table, pushing a vacuum cleaner, bowling, or playing golf



Yes, limited a lot



Yes, limited a little

No, not limited at
all

Lifting or carrying groceries



Yes, limited a lot



Yes, limited a little

No, not limited at
all

Climbing **several** flights of stairs



Yes, limited a lot



Yes, limited a little

No, not limited at
all

Climbing **one** flight of stairs



Yes, limited a lot



Yes, limited a little

No, not limited at
all

Bending, kneeling, or stooping



Yes, limited a lot



Yes, limited a little



No, not limited at
all

Walking **more than a mile**



Yes, limited a lot



Yes, limited a little



No, not limited at
all

Walking **several blocks**



Yes, limited a lot



Yes, limited a little



No, not limited at
all

Walking **one block**



Yes, limited a lot



Yes, limited a little



No, not limited at
all

Bathing or dressing yourself



Yes, limited a lot



Yes, limited a little



No, not limited at
all

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« Previous

Next page »